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| 2 FC:1504 300.00 3 FC:8001 30.00 | DA | CENT | & TRADE | January 27 | 2005 | (Date) | | | | |
| APPLICATION NO. | FILING DATE | <u> </u> | IRST NAME | DINVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | | | | |
| | 01/05/2004 | | Toshihis | | 56832 (71004) | 4906 | | | | |
| 10/752,463 | | DENEL UDER VV | | orming method using | | | | | | |
| APPLN. TYPE nonprovisional | SMALL ENTITY NO | \$1370 | | PUBLICATION FEE \$300 | TOTAL FEE(S) DUE \$1670 | DATE DUE 02/08/2005 | | | | |
| L | MINER W, JOHN L | ART UNI 1756 | Т | CLASS-SUBCLASS 430-126000 | J | | | | | |
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| | MALL ENTITY status. See | | | ant is no longer claiming SMA | | | | | | |
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| Authorized Signature | 40.00 | | | . Date | January 27, 20 | 005 | | | | |
| Typed or printed name _ | January 27, | 2005 | Registration No | | | | | | | |

This collection of information is required by 37 CPR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CPR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/17 (12-04v2)
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| Effec. | Complete if Known | | | | | | | | | | |
| Fees pursuant to the Consoli | Application Nur | | 0/752,463 | | | | | | | | |
| FEE TRANSMITTAL | | | | Filing Date . | | January 5, 2004 | | | | | |
| Foi | First Named Inventor | | Toshihisa Ishida | | | | | | | | |
| <u> </u> | | Examiner Name J | | J. L. Goodrow | | | | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | | , at one | | 1756 | | | | | |
| TOTAL AMOUNT OF PA | Attorney Docket | 56832-DIV (71 |)IV (71004) | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | | | | | |
| x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards & Angell, LLP | | | | | | | | | | | |
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| FEE CALCULATION | | | | | | - | | | | | |
| 1. BASIC FILING, SEAR | CH, AND EXAM | INATION FE | ES | | | | | | | | |
| | | G FEES | SEA | RCH FEES | EXAMIN | IATION FEES | | | | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees P | aid (\$) | | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | • | | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | | | |
| 2. EXCESS CLAIM FEES | | | • | • | · | | | Small Entity | | | |
| Fee Description | | | | | | | Fee (\$) | Fee (\$) | | | |
| Each claim over 20 (including Reissues) | | | | | | | | 25 | | | |
| Each independent claim over 3 (including Reissues) | | | | | | | | 100 | | | |
| Multiple dependent claim | | | | | | | 360 | 180 | | | |
| Total Claims Extr | a ClaimsI | ee (\$) | Fee P | aid (\$) | | ultiple Depende | | | | | |
| - 20 = | × _ | = _ | | | <u>Fe</u> | <u>e (\$)</u> <u>F</u> | ee Paid (\$) | ŀ | | | |
| | | ee (\$) | Fee P | aid (\$) | | | | _ | | | |
| -3= | | = _ | | | | | | | | | |
| 3. APPLICATION SIZE F If the specification and of | drawings exceed | 100 sheets o | f paper (e | xcluding electro | nically file | d sequence or co | mputer | | | | |
| listings under 37 CFF sheets or fraction the | | | | | or small ent | ity) for each add | itional 50 | | | | |
| Total Sheets | Extra Sheets | | | dition al 50 or fra | ction thereo | f Fee (\$) | Fee F | aid (\$) | | | |
| - 100 = | | /50 | | (round up to a who | | | | | | | |
| 4. OTHER FEE(S) | | | | | | · — | Fees I | Paid (\$) | | | |
| Non-English Specifica | | (no small ent | | mt) | | | | | | | |
| Other (e.g., late filing | | 1,400.00 30.00 | | | | | | | | | |
| | mal | 300.00 | | | | | | | | | |
| | $\alpha A \alpha^{-}$ | 1 1 | | | ,, | | | | | | |
| SUBMITTED BY Signature | | A | | Registration No. | 48,399 | Telephone | (617) 439 | 9-4444 | | | |
| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Alexander, Pl | i D | | (Attorney/Agent) | .0,000 | | January 2 | | | | |
| | | | | | | | | January 21, 2000 | | | |
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| I hereby certify that this co | | | | | | | | | | | |

Dated: January 27, 2005